MONTHLY OPERATING REPORT

Chapter 11

SANDERS	SANDERS COMMERCIAL PROPERTIES LLC.					
15-01560 EI	∃ For Period: 0 4/ 01/2016 –4/3⊈/2016					
UE 15 DAYS AFT ss the United State to UST with an orig	TER THE END OF THE MONTH. The Debtor must attach each of the s Trustee has waived the requirement in writing. File with the court and ginal signature.					
Previously Waived	REQUIRED REPORTS/DOCUMENTS					
ched or waived)						
()	Comparative Balance Sheet (FORM 2-B)					
()	Profit and Loss Statement (FORM 2-C)					
()	Cash Receipts & Disbursements Statement (FORM 2-D)					
()	Supporting Schedules (FORM 2-E)					
()	Narrative (FORM 2-F)					
()	Copies of Bank Statement(s) and Reconciliations of Bank Balance to Book Balance for all Account(s)					
that the following we knowledge and b	Monthly Operating Report and any attachments thereto, are true and belief. Sanders Commercial Properties LLC, Debtor By: A David Sanders, Member Name of Preparer: Telephone No. of Preparer:					
	UE 15 DAYS AFT ss the United State to UST with an original previously Waived Ched or waived) () () () () () () () (

COMPARATIVE BALANCE SHEET

				1			
	Filing date 5/13/2015	Month 11/15	Month 12/15	Month 1/16	Month 2/16	Month 3/16	14/16 300-67
ASSETS:							
CURRENT ASSETS:							
Cash	457.96	17,239.37	15,421.09	12,256.29	9,679.18	8,584.88	25,073 62
Office Equipment	2,500.00	2,500.00	2,500.00	2,500.00	2,500.00	2.500.00	3 < 3 > 3
Inventory at lower cost of market							2, 24,
Prepaid expenses and deposits	505.00	505.00	505.00	505.00	505.00	505.00	クァヘ ろ
Other							000,00
TOTAL CURRENT ASSETS	3,462.96	20,244.37	18,426.09	15,261.29	12,684.18	11,589.88	28.078.162
PROPERTY, PLANT & EQUIPMENT	3,014,700.00	3,014,700.00	3,014,700.00	3,014,700.00	3,014,700.00	3,014,700.00	3, 614, 7pp. ga
Less accumulated depreciation							-
NET PROPERTY, PLANT & EQUIPMENT	3,014,700.00	3,014,700.00	3,014,700.00	3,014,700.00	3,014,700.00	3,014,700.00	SO, WI, #19 6
OTHER ASSETS							
TOTAL OTHER ASSETS							
TOTAL ASSETS	3,018,162.96	3,034,944.37	3,033,126.09	3,029,961.29	3,027,384.18	3,026,289.88	3,042,778.62
4							•

If assets are carried at historical cost on debtor's accounting records and debtor elects to show them as such on the monthly reports, note the change above and include remarks on FORM 2-F (Narrative). All subsequent reports must then carry these assets at that value. Do not use historical cost one month and fair market value the next.

FORM 2-B Page 1 of 2

COMPARATIVE BALANCE SHEET

CASE NUMBER:

15-01560 EE

TOTAL LIABILITIES & EQUITY	TOTAL EQUITY (NET WORTH)	Post filing date	Through filing date	RETAINED EARNINGS	COMMON STOCK	PREFERRED STOCK	EQUITY (DEFICIT)	TOTAL LIABILITIES	Other:	Onsecured debt	Y1	ivotes rayable - secured	Notes Payable control	PRE-PETITION LIABILITIES:	TOTAL POST-PETITION LIABILITIES:	Accounts payable (Form 2-E, pg. 1 of 3)	Taxes Payable (Form 2-E, pg. 1 of 3)	POST-PETITION LIABILITIES:	LIABILITIES:	
1,085,094.64										2,600.00	0.00	1,082,494.64								Filing date 5/13/2015
1,085,094.64										2,600.00	0.00	1,082,494.64								Month 11/15
1,085,094.64										2,600.00	0.00	1,082,494.64								Month 12/15
1,085,094.64										2,600.00	0.00	1,082,494.64								Month 1/16
1,085,094.64										2,600.00	0.00	1,082,494.64								Month 2/16
1,085,094.64										2,600.00	0.00	1,082,494.64								Month 3/16
1,085,094.64									0.14	12. NOD. DO	0,00	1,082,494,64								Menty

FORM 2-B Page 2 of 2

PROFIT AND LOSS STATEMENT

CASE NUMBER:

15-01560 EE

	Requires explanation in NARRATIVE (Form 2-F)	INCOME TAX EXPENSE (BENEFII)	EXTRAORDINARY EXPENSES	DEPRECIATION OR AMORTIZATION	INCOME BEFORE DEPRECIATION OR TAXES:	INTEREST EXPENSE:	TOTAL OPERATING EXPENSES	Other:	General and Administrative (rents, utilities, salaries, etc.)	Selling and Marketing	OPERATING EXPENSES:	GROSS PROFIT:	TOTAL COST OF GOODS SOLD:	Manufacturing Overhead	Labor - Direct	Material	COST OF GOODS SOLD:	NET REVENUE	
	8.85						487.96				487.96	496.81						496.81	Month 05/13-05/31
	(1,488.07)						9,005.69				9,005.69	7,517.62						7,517.62	Month 11/15
	(1,818.28)						5,277.88				5,277.88	3,459.60						3,459.60	Month 12/15
	(3,164.80)						8,596.80				8,596.80	5,432.00						5,432.00	Month 1/16
	(2,577.11)						6,016.33				6,016.33	3,439.22						3,439.22	Month 2/16
FORM 2-C	(1,094.30)						6,365.79				6,365.79	5,271.49						5.271.49	Month 3/16
()	HL. SOH'91	Constraint and Constr	enalphienetrachetennespenospenospelijesenesmonen	A CONTRACTOR OF THE PROPERTY O	ACCIONA (ACCIONATORA (ACAMANA) TRABANCACIÓN (ACAMANA) ACAMANA	And the second of the second o	TA X	**************************************			6,051,8	22 SHT 55	en lines (S) total de la little	A CONTRACTOR OF THE PROPERTY O	en e	Commerce and all (1865) (1866) (Commerce and Association Andreas and Association (Commerce and A		30 500 00	3 9 9 9

CASE NUMBER: 15-01560 EE

CASH RECEIPTS AND DISBURSEMENTS STATEMENT

For Period: 4/01/2015 4/30/2016

CASH RECONCILIATION

Beginning Cash Balance (Ending Cash Balance from last month's report) 1.

\$8,584.88

2. Cash Receipts (total Cash Receipts from page

3 of all FORM 2-D's)

s 22,547.55

3. Cash Disbursements (total Cash Disbursements from page 4 of all FORM 2-D's

\$6,051,81

4. Net Cash Flow \$ 16,495.74

Ending Cash Balance (to FORM 2-B)

\$25,073.62

CASH SUMMARY - ENDING BALANCE

Amount*

Financial Institution

1. DIP Operating No. 4442

Regions Bank

2. TOTAL (must agree with line 5 above)

\$25,073.62 \$25,073.62

ADJUSTED CASH DISBURSEMENTS

Cash disbursements on Line 3 above less inter-account transfers & UST fees paid

\$ 5,401,8

*NOTE: This amount should be used to determine UST quarterly fees due and agree with Form 2-D, page 2 of 4.

> FORM 2-D Page 1 of 4

^{*}These amounts should be equal to the previous month's balance for the account plus this month's receipts less this month's disbursements.

CASE NUMBER: 15-01560 EE

QUARTERLY FEE SUMMARY

MONTH ENDED: 4/39/2016

Payment Date	Cash Disbursements*	Quarterly Fee Due	Check No.	<u>Date</u>
January	\$5,446.80			
February	\$6,016.33			
March Total	\$6,365.79			
1 st Quarter	\$17,828.92	\$650.00		
April	\$ 5,401.81 \$			
May	\$			
June	\$			
Total				
2 nd Quarter	\$			
July	\$			
August	\$			
September	\$			
Total				
3 rd Quarter	\$			
October	\$			
November	\$			
December Total	\$			
4 th Quarter	\$			

Fee Schedule

DISBURSEMENT RANGE \$0 to \$14,999.99 \$15,000 to \$74,999.00 \$75,000 to \$149,999.99 \$150,000 to \$224,999.99 \$225,000 to \$299,999.99 \$300,000 to \$999,999.99 \$1,000,000 to \$1,999,999.99 \$2,000,000 to \$2,999,999.99 \$3,000,000 to \$4,999,999.99 \$5,000,000 to \$14,999.99 \$15,000,000 to \$29,999,999.99 \$15,000,000 to \$29,999,999.99 \$30,000,000 to \$29,999,999.99	QUARTERLY FEE \$325 \$650 \$975 \$1,625 \$1,950 \$4,875 \$6,500 \$9,750 \$10,400 \$13,000 \$20,000 \$30,000
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Note that a minimum payment of \$325 is due each quarter even if no disbursements are made in the ease during this

FORM 2-D Page 2 of 4

^{*}Note: should agree with "Adjusted cash disbursements" at bottom of Form 2-D, Page 1 of 4. Disbursements are net of transfers to other debtor in possession bank accounts and net of payments of prior period quarterly fees.

CASE NAME:

SANDERS COMMERCIAL PROPERTIES LLC

CASE NUMBER: 15-01560 EE

CASH RECEIPTS AND DISBURSEMENTS STATEMENT

(This form should be completed for each type of account listed on page 1 of FORM 2-D that the debtor maintained during the month.)

For Period A 01/2016- 4/39/2016

Account Name: Regions DIP Operating

Account Number: 4442

CASH RECEIPTS JOURNAL (attach additional sheets if necessary)

<u>Date</u>	Description (Source)	Amount
04/04/2016 04/06/2016 04/25/2016	Rent: Check into Cash & Hertz Rent: Sam Sanders Trustmark	\$4,361.68 \$200.00 \$709.81
04/05/2014	saed Gazawaneh (Aerif) Check into cash (Rent)	\$ 15,000,00

Total Cash Receipts

\$22,547,55

FORM 2-D Page 3 of 4

CASE NUMBER: 15-01560 EE

CASH RECEIPTS AND DISBURSEMENTS STATEMENT

(This form should be completed for each type of account listed on page 1 of FORM 2-D that the debtor maintained during the month.)

For Period: 4/01/2015 -4/30/2016

Account Name: Regions DIP Operating

Account Number: 4442

CASH DISBURSEMENTS JOURNAL

(attach additional sheets if necessary)

<u>Date</u>	Check No.	Payee	Description/Purpose*	
4/64/16	1161	Entergy	Utilities	Amount おいしい
4105114	1155	Literated Conjugle	Office Rant	di 1300 00
04/06/10	1150	Ohis Hornsby 2	graniand .	125.00
04/07/10 4/11/16 4/11/14	1153 1152 1154	Republic Scrices Waste Management Berkley INS.	Trashpickup Gribasepidur Insurance	364.18 822,43 1,379,00
411/16	1157	John Ramsey	Gote Report	400.00
4/11/16	1159	HT T	Office thone	79,03
4/13/10	1,1660	Ambiance Landson		224.5D
4/14/10	1158	us Toustee	15 Guarier FCC	(₄ 5D, 6O
4/29/10	וועס	Check into Caroli	, Payment	500.3V
		9-1005	Statement fee	9,00
4/29)14 4/29/1U		Agros	monthly fee	6.40

Total Cash Disbursements

18.820,0 1

^{*}Identify any payments to professionals, owners, partners, shareholders, officers, directors or any insiders and all adequate protection payments ordered by the court with an asterisk. Any payments made as a result of a court order, should indicate the order date. Any payments for Trustee's fees or inter-account transfers should be highlighted.

CASE NUMBER:15-01560 EE

SUPPORTING SCHEDULES

For Period: 4/31/2016 -4/31/2016

POST-PETITION ACCOUNTS PAYABLE AGING REPORT

ТҮРЕ	INCURRED	DUE	0 - 30	31 - 60	61 - 90	OVER 90
FITW						
FICA						
FUTA		The state of the s				
SITW						
SUTA						
OTHER TAX						
SUB-TOTAL						
TRADE PAYABLES						
					·	
OTHER						
TOTALS						0.00

FORM 2-E Page 1 of 3

CASE NUMBER: 15-01560 EE

SUPPORTING SCHEDULES

For Period 9/01/2016 -4/30/2016

ACCOUNTS RECEIVABLE AGING REPORT

ACCOUNT NAME	INCURRED	DUE	0 - 30	21.60	(7, 00	OVED 00
1 12 11 11 11	INCORRED	DOE	0-30	31 - 60	61 - 90	OVER 90
					<u> </u>	
						, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,
		· · · · · · · · · · · · · · · · · · ·				
Total						0.00

FORM 2-E Page 2 of 3

CASE NUMBER: 15-01560 EE

SUPPORTING SCHEDULES

For Period: 4/01/2016 - 4/31/2016

INSURANCE SCHEDULE

Premium

Date of

<u>Type</u>

Carrier/Agent

Coverage (\$)

Expiration Paid

Property (Fire, Theft) Yes

Union Insurance Company

10/13/16

⁽¹⁾ Attach copy of certificate of insurance or declaration page of policy for any coverage renewed or replaced during the current reporting month.

⁽²⁾ For the premium paid column enter "yes" if payment of premium is current or "no" if premium payment is delinquent. If "no", explain on Form 2-F, Narrative.

CASE NUMBER: 15-01560 EE

NARRATIVE STATEMENT

For Period 4./01/2016 - 4/50/2016

Please provide a brief description of the significant business and legal action by the debtor, its creditors or the court during the reporting period. Comments should include any change in bank accounts, explanation of extraordinary expenses, and purpose of any new post-petition financing. Comments should also include debtor's efforts during the month to rehabilitate the business and to develop a plan.



Regions Bank Lakeland Dr 1675 Lakeland Drive Jackson, MS 39216

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00115907 01 AV 0.373 001 SANDERS COMMERCIAL PROPERTIES LLC CASE N 15-01560 PO BOX 76 JACKSON MS 39205-0076

ACCOUNT #

Cycle **Enclosures** Page

26 0 of 2

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LIFEGREEN BUSINESS SIMPLE CHECKING

April 1, 2016 through April 29, 2016

\$8,584.88

\$22,547.55

	SUN	IMARY	
}	+	Minimum Balance Average Balance	\$10,860 \$22,117

Beginning Balance Deposits & Credits \$0.00 Withdrawals \$7.00 Fees \$0.00 + **Automatic Transfers** \$6,051.81 Checks

\$25,073.62 **Ending Balance**

DEPOSITS & CREDITS

04/01 04/04 04/05 04/06 04/25	Deposit - Thank You Deposit - Thank You Deposit - Thank You Deposit - Thank You Deposit - Thank You		2,276.06 2,085.62 15,000.00 200.00 709.81 2,276.06
04/29	Deposit - Thank You	Total Deposits & Credits	\$22,547.55

FEES

04/29 Paper Statement Fee Monthly Fee 04/29

2.00 5.00

Total Fees

Total Checks

\$6,051.81

\$7.00

CHECKS

Date	Check No.	Amount	Date	Check No.	Amount
04/06 04/04 04/11 04/07 04/11 04/05	1150 1151 1152 1153 1154 1155	125.00 146.41 822.43 364.18 1,379.00 1,300.00	04/13 04/11 04/14 04/11 04/29	1156 1157 1158 1159 1160	224.50 400.00 650.00 79.93 560.36

* Break In Check Number Sequence.



Regions Bank Lakeland Dr 1675 Lakeland Drive Jackson, MS 39216



SANDERS COMMERCIAL PROPERTIES LLC CASE N 15-01560 PO BOX 76 JACKSON MS 39205-0076

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24442

Cycle 26
Enclosures 0
Page 2 of 2

Date	Balance	Date	Balance	<u>Date</u>	Balance
04/01	10.860.94	04/07	26,210.97	04/25	23,364.92
04/04	12,800.15	04/11	23,529.61	04/29	25,073.62

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ON YOUR PRODUCTS AND SERVICES. ANY
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THE JUNE ANALYSIS STATEMENT YOU WILL
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